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APPLICANTS

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** CONTINUING DATA *****
None fkt

** FOREIGN APPLICATIONS *****
None fkt

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature _____ Initials _____	STATE OR COUNTRY ID	SHEETS DRAWING 6	TOTAL CLAIMS 53	INDEPENDENT CLAIMS 7
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TITLE
 Spread spectrum clocking for data transfer bus loading

FILING FEE RECEIVED 1810	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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